



COMDTINST 1754.9A

22 OCT 1992

COMMANDANT INSTRUCTION **1754.9A**

Subj: Reimbursement of Adoption Expenses

Ref: (a) Public Law ((**Pub.L.**)) **102-190**, "National Defense Authorization Act for Fiscal Years **1992-1993**," Section **651**, December **5, 1991**.
(b) Social Security Act, Section **473(c)** (**42 U.S.C. 673**)
((c))L.

1. PURPOSE. This Instruction implements reference (a) and outlines the policy/procedures for **the** reimbursement of adoption expenses to Coast Guard members. This Instruction applies for the adoption of a child under **18** years of age.
2. DIRECTIVES AFFECTED. **COMDTINST 1754.9** is cancelled.
3. DISCUSSION. In December of **1991**, legislation was enacted, reference (a) (**14 U.S.C 514**), to authorize subsidizing the adoption of children under **18** years of age by members of the Coast Guard. Any member who finalizes an adoption proceedings on or after December **5, 1991**, is eligible to apply for reimbursement expenses. The amount of the reimbursement expenses payable to a Coast Guard member or to two members who are spouses of each other is up to **\$2,000.00** per child (with a maximum reimbursement to one member of **\$5,000.00** in any calendar year).

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3. ~~(cont'd)~~ All monies provided are taxable. The active duty member must meet the criteria set forth in this Instruction (See definitions in enclosure (1)). Participation in the program is designed to assist Coast Guard active duty members to offset the high cost of adoption expenses.
4. POLICY.
- a. Coast Guard active duty members and reservists must be on active duty for at least **180** consecutive days before applying for adoption reimbursement. **No** more than one member may be reimbursed for the expenses related to the adoption of the same child.
 - b. Adoptions that qualify for reimbursement under the program include adoptions by a married couple, by a single person, adoptions of an infant or older child (one under the age of **18**), United States or intercountry adoptions, and adoptions of a child with special needs, as defined in the Social Security Act (reference ~~(b)~~). The adoption of stepchildren or others who are considered the Coast Guard member's dependents for the purpose of receiving military benefits does not qualify for reimbursement under this program.
 - c. Benefits paid under this program shall be paid only after the adoption is final. A benefit may not be paid under this program for any expense paid to or for a member of the Coast Guard under any other adoption benefits program administered by the Federal Government or under any such program administered by a State or local government.
 - d. The application must be submitted within **365** days of the date the adoption becomes final.
 - e. Disbursements shall be supported by appropriate documentation identified in enclosures ~~(2)-(3)~~. The original or copy of the member's signed reimbursement request shall be added as supporting documentation to the disbursement voucher form.
5. PROCEDURES. All Coast Guard active duty members applying for reimbursement of adoption expenses shall:
- a. Register for adoption expense reimbursement, using enclosure ~~(2)~~, as soon as both the home study and placement of the child have occurred.

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5. b. Submit a reimbursement request not later than 365 days after finalization of the adoption. A separate reimbursement request shall be completed for each child whose adoption has been finalized.
- c. Complete the Coast Guard Adoption Reimbursement Forms, enclosures (2) and (3).
- d. Send completed forms and supportive documentation (e.g., proof of home study, lawyer, medical, etc.), involving the adoption to:

Commandant ((G-Pd-3))
U. S. Coast Guard
2100 Second Street, S.W.
Washington, DC 20593-0001

6. ACTION. Area and district commanders, commanders of maintenance and logistics commands, unit commanding officers, and Commander, CG Activities Europe shall ensure compliance with this Instruction and provide the widest dissemination of this information.
7. FORMS AVAILABILITY. Reimbursement Registration for Adoption Expenses 5553 and Reimbursement Request for Adoption Expenses 5553A may be obtained from Commandant ((G-Pd-3)) or may be locally reproduced.


-1-
Chief, Office of Personnel
and Training

- Encl: (1) Definitions
(2) Reimbursement Registration for Adoption Expenses, CG-5553
(3) Reimbursement Request for Adoption Expenses, CG-5553A

DEFINITIONS

1. Adoption. The legal procedure by which a person or couple takes a child that is not their biological offspring into the family and raises the child as their own. Adoption severs all legal ties between the **adoptee** and his or her birth parents and establishes such ties between the **adoptee** and the adoptive parents. Legally, the **adoptee** has the same status with respect to his or her adoptive parents as do any biological siblings.
2. Intercountry adoptions. The legal adoption of a child coming from a country other than the **U. S.** and its territories.
3. Qualifying Adoption Expenses.
 - a. Reasonable and necessary expenses directly related to the legal adoption of a child, but **only** if such adoption is arranged by one of the following procedures:
 - (1) By a State or local government that has responsibility under State or local law for child placement through adoption; or
 - (2) By a nonprofit, voluntary adoption agency authorized by State or local law to place children for adoption.
 - b. Does not include any expenses incurred for the following:
 - (1) Any travel performed by an adopting parent.
 - (2) Any adoption arranged in violation of Federal, ~~State~~ or local law.
4. Reasonable and Necessary Expenses. This term means:
 - a. Public and private agency fees.
 - b. Placement fees, including fees charged adoptive parents for counseling.
 - c. Legal fees, including court costs, in connection with services that are unavailable to a member of the Coast Guard through a legal assistance office as provided under **10 USC Section 1044** or Section **1044a.**
 - d. Medical expenses, including hospital expenses of the biological mother of the child to be adopted and of a newborn infant to be adopted, for medical care given to the adopted child before the adoption, and for physical examinations for the adopting parents.

ENCLOSURE (2) TO COMDTINST 1754.9A

REIMBURSEMENT REGISTRATION FOR ADOPTION EXPENSES
(See Privacy Act Statement on Reverse)

I hereby register my intention to apply for reimbursement of adoption expenses under the provisions of **COMDTINST 1754.9** (series), Reimbursement of Adoption Expenses. I am an active duty member of the United States Coast Guard on continuous active duty for at least **180** days. The date of my home study report was: _____ . Documentation supporting this event is furnished. (A letter stipulating the dates of the home study report and the placement of the child from the ~~agency~~; is sufficient for this purpose.)

To the best of my knowledge, no other military member has requested or will request reimbursement for expenses related to the adoption of the same child. I understand that reimbursement is limited to **\$2,000** per child with a maximum • ' reimbursement to one member of **\$5,000** in any calendar year, or couples where both spouses are members of the armed forces.

INFORMATION REQUIRED BY THE PRIVACY ACT OF 1974

Authority: 5 U.S.C. 5701~~05742~~, 37 U.S.C. 404~~-4277~~,
E.O. 9397, and 14 U.S.C 514.

Principal Purpose: Used for reviewing, approving,
accounting, and disbursing for adoption
reimbursement, **SSN** is used to maintain a
numerical identification system for
individual claims (**14 USC 514**).

Routine Uses: To substantiate claims for adoption
reimbursements.

Disclosure: Voluntary. Failure to furnish
information requested may result in
total or partial denial of amount
claimed.

Member's Name (Print or Type) _____

Signature of Member _____ Date _____

Address _____

Work Telephone _____ Home Telephone _____

SSN _____ Unit _____

REIMBURSEMENT REQUEST FOR ADOPTION EXPENSES

(See Privacy Act Statement on Page 3.)

1. The date that adoption proceedings were initiated
is: _____ Note: Adoption expenses are reimbursable only
to members that have completed or initiated adoption proceedings
on or after December 5, 1991. Adoption proceedings are deemed to
be initiated upon the date of the initial home study report or
the placement of the child in the military member's home.

2. The date the adoption was finalized is: _____.
Note: Reimbursement of adoption expenses may be paid only after
the adoption is final.

3. The adoption was arranged by:

a. _____ A state or local, government agency that has
responsibility under state or local law for
placement of children for adoption.

b. _____ A nonprofit, voluntary adoption agency that is
authorized by state or local law to place children
for adoption.

4 The following expenses were incurred (documentation attached):

- a. \$ _____ Public and private agency fees.
- b. \$ _____ Placement fees, including fees charged adoptive parents for counseling.
- c. \$ _____ Legal fees, including court costs.
- d. \$ _____ Medical expenses, including hospital expenses for the newborn infant, for medical care furnished the adoptive child before the adoption, and for physical examinations of the biological mother of the child to be adopted.
- e. \$ _____ Subtotal of Expenses Listed above (Items 4 a. through 4 d.)).
- f. \$ _____ Amount of reimbursement previously applied for and/or received under any other adoption benefits program administered by the Federal Government or under any such program administered by a state or local government.
- g. \$ _____ Total Expenses (Subtotal in (e) minus any reimbursements in (f)).

INFORMATION REQUIRED BY THE PRIVACY ACT OF 1974

Authority: 5 U.S.C. 5701-~~5742~~, 37 U.S.C. 404-~~427~~, E.O. 9397,, and 14 U.S.C 514.

Principal Purpose: Used for reviewing, approving accounting and disbursing for adoption reimbursement, SSN is used to maintain a numerical identification system for individual claims.

Routine Uses: To substantiate claims for adoption reimbursements.

Disclosure: Voluntary. Failure to furnish information requested may result in total or partial denial of amount claimed.

I certify that the above information and expenses are true and correct to the best of my knowledge. I understand and agree that reimbursement of expenses is limited to \$2,000 per adopted child with maximum reimbursement of \$5,000 in any calendar year. I agree not to seek further reimbursement under this program for the adoption of this child. To the best of my knowledge, I am the only active duty member of the Armed Forces claiming for this child reimbursement of \$ _____.

Signature of Member _____ Date_____.